Connecticut State Innovation Model (SIM) Project

Healthcare Innovation Steering Committee & Workgroups

Office of the Healthcare Advocate, Hartford CT

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My name is Supriyo B. Chatterjee and I reside in West Hartford Connecticut. I would like to submit my comments for your consideration. The Connecticut State Health Innovation Plan has stated the will to eliminate health disparities. To address that goal, the Plan seeks to apply the 'Culturally and Linguistically Appropriate Services (CLAS)' Standards in the SIM programs such as Advanced Medical Home (AMH), and Practice Transformation.

The SIM program's expectation being that in applying CLAS Standards would increase the healthcare provider's 'Cultural Competency' and thereby, mitigate disparities. While this can be achieved but it is only done so with diligence, measurement and evaluation of the provider's delivery cycle as portrayed in examples by AHRQ and NQF approaches. Delivery outcomes could also be tied back to the effectiveness of the CLAS program implementation as each is unique to its socio-demographic area. I don't think merely, counting the number of providers that meet CLAS Standards will be adequate in addressing health disparities.

The CLAS Standards were first introduced in 2000 and since 2008, there has been a costly effort in implementing it as a standard in Connecticut. But, health disparities still prevails, making it even costlier.

I thank you all for your time.

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